Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapte	er 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
<u>+</u>	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_form s.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on Voluntary Petition for Individuals Filing for Bankruptcy (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a joint case. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days before you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF MICHIGAN	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's	Jacob First name	First name	
	license or passport).	Rene Middle name	Middle name	
	Bring your picture identification to your meeting with the trustee.	Shorkey Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)	
2.	All other names you have used in the last 8 years			
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8467		

Debtor 1 Jacob Rene Shorkey

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s)	☐ I have not used any business name or EINs. Business name(s)
		EINs	EINs
5.	Where you live	28739 Apollo Drive Chesterfield, MI 48047	If Debtor 2 lives at a different address:
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Macomb County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	■ Chap	ter 7					
		☐ Chap	ter 11					
		☐ Chap	ter 12					
		☐ Chap	ter 13					
8.	How you will pay the fee	ab	out how y	ou may pay. Typically attorney is submitting	, if you are paying the fee yo	ck with the clerk's office in your local court for mo burself, you may pay with cash, cashier's check, alf, your attorney may pay with a credit card or cl	or money	
				y the fee in installme ee in Installments (Off		on, sign and attach the Application for Individuals	s to Pay	
			-	,	,	n only if you are filing for Chapter 7. By law, a jud	dae mav.	
		bu ap	t is not red plies to yo	quired to, waive your f ur family size and you	ee, and may do so only if your are unable to pay the fee i	our income is less than 150% of the official pover n installments). If you choose this option, you mu cial Form 103B) and file it with your petition.	ty line that	
9.	Have you filed for bankruptcy within the	■ No.						
	last 8 years?	☐ Yes.						
			District		When	Case number		
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your	□ No.	Go to	line 12.				
	residence?	Yes.	Has y	our landlord obtained	an eviction judgment agains	st you?		
				No. Go to line 12.				
				Yes. Fill out <i>Initial</i> S bankruptcy petition.	tatement About an Eviction	Judgment Against You (Form 101A) and file it wi	th this	

Case number (if known)

Debtor 1 Jacob Rene Shorkey

Jeb	Jacob Rene Snori	key			Case number (if known)
art	Report About Any Bu	sinesses	You Own	as a Sole Proprie	tor
2.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	and location of bus	siness
	A sole proprietorship is a				
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Sta	te & ZIP Code
	it to this petition.		Check	the appropriate bo	ox to describe your business:
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Rea	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as d	lefined in 11 U.S.C. § 101(53A))
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))
				None of the above	е
3.	Chapter 11 of the deadlines. If you i		s. If you in ns, cash-fl	dicate that you are ow statement, and the	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of <i>small</i> business debtor, see 11 U.S.C. § 101(51D).	■ No.	I am r	ot filing under Chap	oter 11.
		□ No.	I am fi Code.		11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am f	ling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
ari	4: Report if You Own or	Have Any	/ Hazardo	us Property or An	y Property That Needs Immediate Attention
	Do you own or have any	■ No.			, ,, , ,
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	■ No. ☐ Yes.	What is	he hazard?	
	public health or safety? Or do you own any property that needs immediate attention?			iate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?	
	-				Number, Street, City, State & Zip Code

Debtor 1 Jacob Rene Shorkey

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1 Jacob Rene Shork	кеу		Case numb	Der (if known)
Par	t 6: Answer These Quest	ons for R	eporting Purposes		
16.	What kind of debts do you have?	16a.		consumer debts? Consumer debts are de sonal, family, or household purpose."	fined in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.		
			Yes. Go to line 17.		
		16b.		ousiness debts? Business debts are debts estment or through the operation of the bu	
			☐ No. Go to line 16c.	ō ,	
			☐ Yes. Go to line 17.		
		16c.	State the type of debts you	owe that are not consumer debts or busine	ess debts
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	r 7. Go to line 18.	
	Do you estimate that after any exempt property is excluded and	■ Yes.		Do you estimate that after any exempt provailable to distribute to unsecured creditors	perty is excluded and administrative expenses s?
	administrative expenses		■ No		
	are paid that funds will be available for		□Yes		
	distribution to unsecured creditors?				
18.	How many Creditors do	■ 1-49		□ 1,000-5,000	□ 25,001-50,000
	you estimate that you owe?	■ 1-49 □ 50-99)	☐ 5001-10,000	☐ 50,001-100,000
	owe?	□ 100-1	99	□ 10,001-25,000	☐ More than100,000
		□ 200-9	199		
19.	How much do you	\$0 - \$	550,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion
	estimate your assets to be worth?		001 - \$100,000	□ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion
			,001 - \$500,000 ,001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion
		ш ф500,		,,	
20.	How much do you estimate your liabilities	■ \$0 - \$50,000 □ \$50,001 - \$100,000 □ \$100,001 - \$500,000		□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion
	to be?			□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion
			,001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion
Par	t 7: Sign Below				
For	you	I have ex	camined this petition, and I de	eclare under penalty of perjury that the info	rmation provided is true and correct.
					e, under Chapter 7, 11,12, or 13 of title 11,
				relief available under each chapter, and I o	·
				not pay or agree to pay someone who is n he notice required by 11 U.S.C. § 342(b).	not an attorney to help me fill out this
		I request	relief in accordance with the	chapter of title 11, United States Code, sp	ecified in this petition.
		bankrupt and 357	tcy case can result in fines up	t, concealing property, or obtaining money to \$250,000, or imprisonment for up to 20	or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519,
		Jacob I	bb Rene Shorkey Rene Shorkey e of Debtor 1	Signature of Debt	or 2
		Executed	d on May 13, 2019	Executed on	
			MM / DD / YYYY		M / DD / YYYY

Debtor 1 Jacob Rene Shorkey		Case number (if known)	
For your attorney, if you are represented by one	I, the attorney for the debtor(s) named in this petition under Chapter 7, 11, 12, or 13 of title 11, United Sta for which the person is eligible. I also certify that I h	tes Code, and have explained the relief a	vailable under each chapter
If you are not represented by an attorney, you do not need	and, in a case in which § 707(b)(4)(D) applies, certification schedules filed with the petition is incorrect.	y that I have no knowledge after an inquir	y that the information in the

/s/ Robert W. Lee Date May 13, 2019 Signature of Attorney for Debtor MM / DD / YYYY Robert W. Lee (P28708) Printed name Robert W. Lee Firm name 25550 North River Road Harrison Township, MI 48045 Number, Street, City, State & ZIP Code Contact phone **586-469-3556** Robert.W.Lee@comcast.net Email address (P28708) MI

Bar number & State

to file this page.

Fill	in this inform	ation to identify your	case:			
	tor 1	Jacob Rene Shor	key			
Deb	tor 2	First Name	Middle Name	Last Name		
	use if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Ban	kruptcy Court for the:	EASTERN DISTRICT (OF MICHIGAN		
Cas (if kno	e number				_	k if this is an nded filing
Su Be a	mmary of	nd accurate as possib	le. If two married people	nd Certain Statistical Information e are filing together, both are equally responsible the information on this form. If you are filing ame	for supplyi	
	original form			ck the box at the top of this page.	idea scriedo	ales after you file
					Your a	assets of what you own
1.	Schedule A/I 1a. Copy line	B: Property (Official Fo	orm 106A/B) rom Schedule A/B		. \$	0.00
	1b. Copy line	62, Total personal pro	perty, from Schedule A/B		. \$	13,920.00
	1c. Copy line	63, Total of all property	y on Schedule A/B		\$	13,920.00
Part	2: Summa	rize Your Liabilities				
						iabilities nt you owe
2.			laims Secured by Propert nn A, Amount of claim, at	y (Official Form 106D) t the bottom of the last page of Part 1 of <i>Schedule D.</i>	\$	13,843.00
3.	Schedule E/F 3a. Copy the	F: Creditors Who Have total claims from Part	Unsecured Claims (Official 1) (Official 1) (Official 1) (Official 2) (al Form 106E/F) ms) from line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Copy the	total claims from Part	2 (nonpriority unsecured	claims) from line 6j of Schedule E/F	. \$	33,371.00
				Your total liabilitie	es \$	47,214.00
Part	3: Summa	rize Your Income and	Expenses			
4.		our Income (Official Fo		le I	\$	1,330.00
5.		Your Expenses (Official onthly expenses from li			\$	1,329.00
Part	4: Answer	These Questions for	Administrative and Sta	tistical Records		
6.	•		on this part of the form.	? Check this box and submit this form to the court with	your other sc	hedules.
7.	YesWhat kind of	f debt do you have?				
	■ Your de	ebts are primarily con	sumer debts. Consumer	debts are those "incurred by an individual primarily f	or a persona	, family, or

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Summary of Your Assets and Liabilities and Certain Statistical Information Official Form 106Sum

page 1 of 2

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

1,596.17

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total claim	
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Fill in tr	his into	rmation to identify your	case an	nd this filing:				
Debtor 1	1	Jacob Rene Shor		Middle Name	Last Name			
Debtor 2	2	Filst Name	יו	Middle Name	Last Name			
(Spouse, if		First Name	N	Middle Name	Last Name			
United S	States B	ankruptcy Court for the:	EASTE	ERN DISTRICT OF	MICHIGAN			
Coop ni	umah a r		-				_	
Case nu	umber							Check if this is an amended filing
								S
Offici	ial E	orm 1061/P						
_		orm 106A/B						
Sch	<u>edu</u>	le A/B: Prop	erty	<u>/</u>				12/15
think it fit	ts best. on. If mo	Be as complete and accura ore space is needed, attach	ate as pos	ssible. If two married	nce. If an asset fits in more that d people are filing together, bo n. On the top of any additional	th are equally responsible	for supply	ying correct
Part 1:	Describe	e Each Residence, Building	g, Land, c	or Other Real Estate	You Own or Have an Interest I	1		
1. Do yo ı	u own or	have any legal or equitable	e interes	t in any residence, b	ouilding, land, or similar proper	ty?		
■ No	. Go to Pa	ort 2						
_		is the property?						
	J. ************************************	to the property.						
Part 2:	Describe	e Your Vehicles						
	, vans, t	rives. If you lease a vehicl		•	ele G: Executory Contracts an	d Unexpired Leases.		
_ 100	J							
3.1 N	Лаке:	CHEVROLET		Who has an intere	est in the property? Check one			s or exemptions. Put aims on <i>Schedule D:</i>
M	Model:	CAMARO		Debtor 1 only				Secured by Property.
	/ear:	2012		Debtor 2 only		Current value of		urrent value of the
	Approxima Other info		,000	Debtor 1 and D		entire property?	p	ortion you own?
_		n: 28739 Apollo Drive	2 .	At least one of t	the debtors and another			
		Itimore MI 48047	,	Check if this is (see instructions)	s community property	\$8,000	0.00	\$8,000.00
	ples: Bo				al vehicles, other vehicles, sels, snowmobiles, motorcycl			
.page	es you h	nave attached for Part 2.	. Write t	hat number here	ntries from Part 2, including			\$8,000.00
.page	es you h		. Write ti	hat number here			port Do r	\$8,000.00 rent value of the tion you own? not deduct secured ms or exemptions.

□ No

Official Form 106A/B Schedule A/B: Property

page 1

Debtor	Jacob Rene	Shorkey	Case number (if known)	
■ Ye	es. Describe			
		MISC HOUSEHOLD GOODS Location: 28739 Apollo Drive, New Baltimore MI 48047		\$2,000.00
Exar	including cell	nd radios; audio, video, stereo, and digital equipment; computers, pr phones, cameras, media players, games	inters, scanners; music c	collections; electronic devices
		MISC TVS AND OTHER ELECTRONICS Location: 28739 Apollo Drive, New Baltimore MI 48047		\$1,000.00
Exar ■ N	other collection	figurines; paintings, prints, or other artwork; books, pictures, or othe ons, memorabilia, collectibles	r art objects; stamp, coin	, or baseball card collections;
Exai	musical instru	graphic, exercise, and other hobby equipment; bicycles, pool tables,	golf clubs, skis; canoes	and kayaks; carpentry tools;
■ N	amples: Pistols, rifles	s, shotguns, ammunition, and related equipment		
	amples: Everyday cl	othes, furs, leather coats, designer wear, shoes, accessories		
		MISC CLOTHING Location: 28739 Apollo Drive, New Baltimore MI 48047		\$1,000.00
□ N	amples: Everyday je	welry, costume jewelry, engagement rings, wedding rings, heirloom j	ewelry, watches, gems, o	gold, silver
		MISC JEWELRY Location: 28739 Apollo Drive, New Baltimore MI 48047		\$500.00
Exa No O Ye 14. Any No	es. Describe other personal an	d household items you did not already list, including any health	aids you did not list	
		of all of your entries from Part 3, including any entries for pages	s you have attached	\$4,500.00

Debtor	Jacob Rene Shorke	У	C	ase number <i>(if known)</i>	
Part 4:	Describe Your Financial Asset	· ·			
	u own or have any legal or e		of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	<i>camples:</i> Money you have in y	•	in a safe deposit box, and on hand wh	nen you file your petition	
				Cash Location: 28739 Apollo Drive, New Baltimore MI 48047	\$100.00
	institutions. If you ha		; certificates of deposit; shares in cred the same institution, list each.	dit unions, brokerage hou	ses, and other similar
■ Y	/es		Institution name:		
	17.1.	Checking and Savings Account	MICHIGAN SCHOOLS & GOV	CREDIT UNION	\$10.00
Ex ■ N		-	ge firms, money market accounts		
	int venture	interests in incorporate	ed and unincorporated businesses,	including an interest in	an LLC, partnership, and
□ Y	es. Give specific information Na	about them me of entity:	•	% of ownership:	
Ne	egotiable instruments include on-negotiable instruments are	personal checks, cashiers	le and non-negotiable instruments of checks, promissory notes, and mon or to someone by signing or delivering		
ΠY	es. Give specific information lss	about them uer name:			
Ex	No	SA, Keogh, 401(k), 403(b), thrift savings accounts, or other per	nsion or profit-sharing plan	ns
Y	es. List each account separa Type	tely. of account:	Institution name:		
	IRA		CHARLES SCHWAB		\$1,010.00
Yo Ex	camples: Agreements with land	ts you have made so that	you may continue service or use fron c utilities (electric, gas, water), telecon		, or others
■ N	√es		Institution name or individual:		
	nuities (A contract for a perio		you, either for life or for a number of y	vears)	
ΠY	es Issuer nam	ne and description.			

De	ebtor 1 🔪	Jacob Rene Shorkey		C	ase number <i>(if known)</i>	
24.	Interests i	•	ount in a qualified ABLE program, or uno b)(1).	der a qual	ified state tuition progra	n.
	■ No □ Yes	Institution name and	d description. Separately file the records of a	any interes	sts.11 U.S.C. § 521(c):	
25.	Trusts, ed ■ No	quitable or future interests in	property (other than anything listed in lir	ne 1), and	rights or powers exercis	able for your benefit
	☐ Yes. Gi	ve specific information about th	em			
26.			secrets, and other intellectual property ites, proceeds from royalties and licensing a	agreement	s	
		ive specific information about the	em			
		, franchises, and other genera s: Building permits, exclusive lice	I l intangibles enses, cooperative association holdings, liq	uor license	es, professional licenses	
	☐ Yes. Gi	ve specific information about the	em			
M	oney or pro	operty owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
		ds owed to you				
	☐ No ■ Yes. Giv	ve specific information about the	em, including whether you already filed the r	returns and	the tax vears	
		·	, , ,		,	
			ACCRUED INCOME TAX REFUNDS 2019	FOR	Federal & State	\$300.00
	■ No		, spousal support, child support, maintenar	nce, divorc	e settlement, property sett	lement
	Example:	ounts someone owes you s: Unpaid wages, disability insur benefits; unpaid loans you ma	ance payments, disability benefits, sick pay ade to someone else	, vacation	pay, workers' compensati	on, Social Security
		in insurance policies s: Health, disability, or life insura	nnce; health savings account (HSA); credit,	homeowne	er's, or renter's insurance	
	☐ Yes. Na	me the insurance company of e Company na		Beneficiary	r.	Surrender or refund value:
	If you are	est in property that is due you the beneficiary of a living trust, has died.	from someone who has died expect proceeds from a life insurance police	y, or are c	urrently entitled to receive	property because
		ve specific information				
	Example		r not you have filed a lawsuit or made a dees, insurance claims, or rights to sue	demand fo	or payment	
	■ No □ Yes. De	escribe each claim				

Debto	Jacob Rene Shorkey			Case number (if known)	
34. Ot l	her contingent and unliquidated claims of ev	very nature, includ	ling counterclaims	of the debtor and rights to	set off claims
	No				
	Yes. Describe each claim				
35. An	ny financial assets you did not already list				
	No				
	Yes. Give specific information				
	Add the dollar value of all of your entries from or Part 4. Write that number here				\$1,420.00
Part 5:	Describe Any Business-Related Property You Ov	wn or Have an Intere	st In. List any real esta	ate in Part 1.	
37. Do :	you own or have any legal or equitable interest in a	any business-related	d property?		
■ N	o. Go to Part 6.				
□ Ye	es. Go to line 38.				
Part 6:	Describe Any Farm- and Commercial Fishing-Rel If you own or have an interest in farmland, list it in Pa	Part 1.			
_	No. Go to Part 7.	rest in any farin- c	or commercial name	ig-related property:	
	Yes. Go to line 47.				
<i>E</i> > ■ N	you have other property of any kind you did examples: Season tickets, country club members	d not already list?	Did Not List Above		
	Add the dollar value of all of your entries from	m Part 7. Write tha	t number here		\$0.00
	Part 1: Total real estate, line 2				\$0.00
	Part 2: Total vehicles, line 5	lima 4E	\$8,000.00		
	Part 3: Total personal and household items, li	line 15	\$4,500.00		
	Part 4: Total financial assets, line 36	1 5	\$1,420.00		
	Part 5: Total business-related property, line 4	-	\$0.00		
	Part 6: Total farm- and fishing-related propert	-	\$0.00		
	Part 7: Total other property not listed, line 54	-	\$0.00		
62. T	otal personal property. Add lines 56 through 6	61	\$13,920.00	Copy personal property t	otal \$13,920.00
63. T	otal of all property on Schedule A/B. Add line	e 55 + line 62			\$13,920.00

Debtor 1	Jacob Rene Shor	key		
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F MICHIGAN	
if known)				☐ Check if this is ar amended filing

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

	• • • • • • • • • • • • • • • • • • • •										
Pa	rt 1: Identify the Property You Claim as I	Exempt									
1.	Which set of exemptions are you claiming	Thich set of exemptions are you claiming? Check one only, even if your spouse is filing with you.									
	☐ You are claiming state and federal nonba	S.C. § 522(b)(3)									
	■ You are claiming federal exemptions. 11										
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.										
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own		Specific laws that allow exemption							
		Copy the value from Check only one box for each exemption. Schedule A/B									
	2012 CHEVROLET CAMARO 90,000 miles	\$8,000.00		\$4,000.00	11 U.S.C. § 522(d)(2)						
	Location: 28739 Apollo Drive, New Baltimore MI 48047			100% of fair market value, up to any applicable statutory limit							
	Line from Schedule A/B: 3.1										
	MISC HOUSEHOLD GOODS Location: 28739 Apollo Drive, New	\$2,000.00		\$2,000.00	11 U.S.C. § 522(d)(3)						
	Baltimore MI 48047 Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit							
	MISC TVS AND OTHER ELECTRONICS	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(3)						
	Location: 28739 Apollo Drive, New Baltimore MI 48047			100% of fair market value, up to any applicable statutory limit							
	Line from Schedule A/B: 7.1										
	MISC CLOTHING Location: 28739 Apollo Drive, New	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(3)						
	Baltimore MI 48047 Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit							
	MISC JEWELRY Location: 28739 Apollo Drive, New	\$500.00		\$500.00	11 U.S.C. § 522(d)(4)						
	Baltimore MI 48047 Line from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit							

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Cash Location: 28739 Apollo Drive, New	\$100.00		\$100.00	11 U.S.C. § 522(d)(5)
В	Baltimore MI 48047 Line from Schedule A/B: 16.1			100% of fair market value, up to any applicable statutory limit	
	Checking and Savings Account: MICHIGAN SCHOOLS & GOV CREDIT	\$10.00		\$10.00	11 U.S.C. § 522(d)(5)
	UNION Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
	IRA: CHARLES SCHWAB Line from Schedule A/B: 21.1	\$1,010.00		\$1,010.00	11 U.S.C. § 522(d)(5)
	Life Holli Schedule A/B. 21.1			100% of fair market value, up to any applicable statutory limit	
	Federal & State: ACCRUED INCOME TAX REFUNDS FOR 2019	\$300.00		\$300.00	11 U.S.C. § 522(d)(5)
	Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/22 and every 3 ■ No ■ Yes. Did you acquire the property covered.	3 years after that for ca	ises fi	,	,
	□ No □ Yes				
	-				

Fill in this information to Debtor 1 Jac	o identify your ob Rene Sho					
First N		Middle Name	Last Name			
Debtor 2 (Spouse if, filing) First N	lame	Middle Name	Last Name			
United States Bankruptcy	Court for the:	EASTERN DISTRICT OF M	ICHIGAN			
Case number (if known)					_	if this is an led filing
Official Form 106		Who Llove Claims	a Cagurad	by Dranarty		40/45
Schedule D: C	reditors	Who Have Claims	s Securea	by Property	<u>/</u>	12/15
		two married people are filing togut, number the entries, and attach				
1. Do any creditors have cla	aims secured by	your property?				
☐ No. Check this bo	x and submit th	is form to the court with your oth	ner schedules. You	u have nothing else to	report on this form.	
Yes. Fill in all of the	ne information b	elow.				
Part 1: List All Secur	ed Claims					
		ore than one secured claim, list the	creditor separately	Column A	Column B	Column C
for each claim. If more than	one creditor has	a particular claim, list the other credit all order according to the creditor's n	itors in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
MI Schools &	alit I lucia u	Describe the property that coour	as the alaim.	\$13,843.00	\$8,000.00	\$5,843.00
Creditor's Name	ealt Union	2012 CHEVROLET CAMAI miles Location: 28739 Apollo Di	RO 90,000	Ψ10,040.00	Ψο,σσσ.σσ	Ψο,οτο.ου
40400 Garfield R Clinton Twp., Ml		Baltimore MI 48047 As of the date you file, the claim apply. Contingent	is: Check all that			
Number, Street, City, Stat	e & Zip Code	☐ Unliquidated ☐ Disputed				
Who owes the debt? Che	ck one.	Nature of lien. Check all that appl	ly.			
■ Debtor 1 only □ Debtor 2 only		An agreement you made (such a car loan)	as mortgage or secu	red		
Debtor 1 and Debtor 2 or	nly	☐ Statutory lien (such as tax lien, i	mechanic's lien)			
At least one of the debtor	rs and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim related community debt	tes to a	Other (including a right to offset)			
Date debt was incurred		Last 4 digits of account nu	umber <u>9215</u>			
		olumn A on this page. Write that no		\$13,843	3.00	
Write that number here:	your form, add t	he dollar value totals from all pag	to.	\$13,843	3.00	
Part 2: List Others to	Re Notified for	a Doht That You Alroady List	ed			

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

Fill in thi	s information to identify you	r case:				
Debtor 1	Jacob Rene Sho	orkey Middle Name	Last Name			
Debtor 2 (Spouse if, f		Middle Name	Last Name			
United St	ates Bankruptcy Court for the:	EASTERN DISTRICT OF	F MICHIGAN			
Case nur (if known)	nber				_	neck if this is an
Sched	Form 106E/F ule E/F: Creditors			art 2 for graditors with NON	IDDIODITY oloim	12/15
any execut Schedule (Schedule I left. Attach name and	plete and accurate as possible. I ory contracts or unexpired lease 3: Executory Contracts and Une. 0: Creditors Who Have Claims So the Continuation Page to this p case number (if known).	es that could result in a claim. xpired Leases (Official Form 10 ecured by Property. If more spa age. If you have no information	Also list executory co 06G). Do not include ar ace is needed, copy the	ntracts on Schedule A/B: P ny creditors with partially s e Part you need, fill it out, r	Property (Officia secured claims t number the entr	Il Form 106A/B) and on that are listed in ries in the boxes on the
Part 1:	List All of Your PRIORITY I					
	y creditors have priority unsecu	red claims against you?				
	. Go to Part 2.					
☐ Ye						
Part 2:	List All of Your NONPRIOR					
3. Do an	y creditors have nonpriority uns	ecured claims against you?				
□ No	. You have nothing to report in this	part. Submit this form to the cou	ırt with your other sched	ules.		
■ Ye	S.					
unsec	Il of your nonpriority unsecured ured claim, list the creditor separat ne creditor holds a particular claim	ely for each claim. For each clair	n listed, identify what typ	pe of claim it is. Do not list cla	aims already inclu	uded in Part 1. If more
						Total claim
4.1	merican Express	Last 4 digits	of account number	3101		\$1,248.00
F	onpriority Creditor's Name	When was th	e debt incurred?			
	El Paso, TX 79998 lumber Street City State Zip Code	As of the dat	e you file, the claim is:	· Check all that apply		
	/ho incurred the debt? Check on		e you me, me claim is.	Oneck all that apply		
	Debtor 1 only	☐ Contingen	t			
	Debtor 2 only	☐ Unliquidat				
	Debtor 1 and Debtor 2 only	☐ Disputed				
_	At least one of the debtors and a	- '	PRIORITY unsecured	claim:		
	Check if this claim is for a co	mmunity	ans			
d	ebt s the claim subject to offset?		s arising out of a separa	ation agreement or divorce th	at you did not	
	No	☐ Debts to p	ension or profit-sharing	plans, and other similar debt	ts	
	Yes	Other. Spe	ecify Credit card o	debt		

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 10

Debto	Jacob Rene Shorkey	Case number (if known)	
4.2	Barclays Bank Delaware Nonpriority Creditor's Name PO Box 8803 Wilmington, DE 19899	Last 4 digits of account number 5438 When was the debt incurred?	\$1,305.00
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit card debt	
4.3	Capital One Bank USA Nonpriority Creditor's Name	Last 4 digits of account number	\$4,986.00
	10700 Capital One Way Glen Allen, VA 23060	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Credit Card	
4.4	CB/Carson's Nonpriority Creditor's Name	Last 4 digits of account number	\$405.00
	PO Box 182789 Columbus, OH 43218	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit Card	

Debto	or 1 Jacob Rene Shorkey	Case number (if known)	
4.5	Chase Nonpriority Creditor's Name P.O. Box 15298	Last 4 digits of account number 6619 When was the debt incurred?	\$3,009.00
	Wilmington, DE 19850 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one. ■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No □ Yes	Other. Specify Credit card debt	
4.6	Chase	Last 4 digits of account number 6619	\$5,185.00
	Nonpriority Creditor's Name P.O. Box 15298 Wilmington, DE 19850	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit card debt	
4.7	Clarkston Lakes Family Medicine Nonpriority Creditor's Name	Last 4 digits of account number 6721	\$191.00
	PO Box 775415 Chicago, IL 60677	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes		
	□ 162	Other. Specify Medical Bill	

Jacob Rene Shorkey	Case number (if known)	
Discount Tire	Last 4 digits of account number	Unknown
Nonpriority Creditor's Name PO Box 965036 Orlando, FL 32896	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
lebt s the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit Card	
Discover	Last 4 digits of account number 0277	\$4,114.00
Nonpriority Creditor's Name PO Box 15316 Wilming, DE 19850	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Vho incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
ebt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit card debt	
Henry Ford Health System	Last 4 digits of account number 1769	\$206.00
Ionpriority Creditor's Name	Last 4 digits of account number	Ψ200.00
PO Box 553920	When was the debt incurred?	
Detroit, MI 48255 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As or the date you me, the claim is. Oneck an triat appry	
Debtor 1 only	☐ Contingent	
□ Debtor 1 only □ Debtor 2 only	☐ Unliquidated	
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify Medical Bill	

Kohl's	Last 4 digits of account number 7014	\$1,821.0
Nonpriority Creditor's Name PO Box 3115	When was the debt incurred?	
Milwaukee, WI 53201 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the dam's. Once all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
□Yes	Other. Specify Credit card debt	
LCA Collections	Last 4 digits of account number 7524	\$95.0
Nonpriority Creditor's Name	Last 4 digits of account number	Ψ33.0
c/o Laboratory Corp of America PO Box 2240	When was the debt incurred?	
Burlington, NC 27216 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	no of the date you me, the olam is officer and that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical Bill	
LJ Ross and Assoc	Last 4 digits of account number 1769	Unknow
Nonpriority Creditor's Name 4 Universal Way Jackson, MI 49202	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	\square Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Collection - Henry Ford Health System	

Jacob Rene Shorkey	Case number (if known)	
Lord & Taylor/Capital One	Last 4 digits of account number 0121	\$538.00
Nonpriority Creditor's Name PO Box 30253 Salt Lake City, UT 84130-0285	When was the debt incurred?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
□Yes	Other. Specify Credit card debt	
Macy's - Customer Service	Last 4 digits of account number 8910	\$188.00
Nonpriority Creditor's Name	Last 4 digits of account number	Ψ100.00
PO Box 8218	When was the debt incurred?	
Mason Oh, io 45040 Number Street City State Zip Code	As of the date you file the claim in Observation that	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify Credit card debt	
MI Oak aala O Oassansansk Oasski		
MI Schools & Government Credit Union Nonpriority Creditor's Name	Last 4 digits of account number 9215	\$559.00
40400 Garfield Rd	When was the debt incurred?	
Clinton Twp., MI 48038 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	, as a subject the subject to the su	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Credit card debt	

Jacob Rene Shorkey	Case number (if known)	
Midland Credit Management	Last 4 digits of account number	Unknow
Nonpriority Creditor's Name 2365 Northside Drive Ste 300 San Diego, CA 92108	When was the debt incurred?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Collection - SYNCB/ABC WAREHOUSE	
Midland Credit Management Nonpriority Creditor's Name	Last 4 digits of account number	Unknowi
2365 Northside Drive Ste 300 San Diego, CA 92108	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	☐ Student loans	
ls the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Collection - Capital One Bank USA	
Nationwide Credit	Last 4 digits of account number	Unknowi
Nonpriority Creditor's Name PO Box 14581	When was the debt incurred?	
Des Moines, IA 50306 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
ls the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	

Nordstrom/TD Bank USA	Last 4 digits of account number 4379	\$1,449.00
Nonpriority Creditor's Name	Last 4 digits of account number 4379	\$1,449.00
13531 É Caley Ave Englewood, CO 80111	When was the debt incurred?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify Credit Card	
Paypal/SYNCB	Last 4 digits of account number 0570	\$2,136.00
Nonpriority Creditor's Name PO Box 5138 Timonium, MD 21094	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt s the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify Credit Card	
Portfolio Recovery	Last 4 digits of account number	Unknown
Nonpriority Creditor's Name 120 Corporate Blvd	When was the debt incurred?	
Norfolk, VA 23502 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other Specify Collection Agency - CB/Carson's	

Roseville Urgent Care	Last 4 digits of account number 4180	\$114.00
Nonpriority Creditor's Name 20769 E 13 Mile Rd Roseville, MI 48066	When was the debt incurred?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify Medical Bill	
SYNCB/ABC WAREHOUSE	Last 4 digits of account number 0538	\$1,813.00
Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 965036	When was the debt incurred?	
Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit Card	
SYNCB/Car Care Disc Tire	Last 4 digits of account number 4518	\$1,964.00
Nonpriority Creditor's Name PO Box 965001	When was the debt incurred?	
Orlando, FL 32896 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	,	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Credit Card	

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

4.2	
6	ı

.2	SYNCB/Care Credit	Last 4 digits of account number 4036	\$2,045.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 965036	When was the debt incurred?	
	Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit card debt	

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				-	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
	6f.	Student loans	6f.	\$	Total Claim
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	33,371.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	33,371.00

Fill in this infor	mation to identify your	case:			
Debtor 1	Jacob Rene Shor				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	PF MICHIGAN		
Case number (if known)				☐ Check if this is amended filing	

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Number	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.3	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

Fill in thi	s information to identif	v vour case:			
Debtor 1					
Debior 1	Jacob Reno	Middle Name	Last Name		
Debtor 2 (Spouse if, f	iling) First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court fo	or the: EASTERN DISTRICT	OF MICHIGAN		
Case nur	nber	_			☐ Check if this is an amended filing
Officia	al Form 106H				
Sche	dule H: Your	Codebtors			12/15
people ar fill it out,	e filing together, both a and number the entries	who are also liable for any do are equally responsible for su s in the boxes on the left. Atta known). Answer every question	pplying correct informat ch the Additional Page t	ion. If more space is need	led, copy the Additional Page,
1. Do	you have any codebto	ors? (If you are filing a joint case	e, do not list either spouse	as a codebtor.	
■ No	-				
		ave you lived in a community uisiana, Nevada, New Mexico, F			ates and territories include
	o. Go to line 3. es. Did your spouse, form	ner spouse, or legal equivalent li	ive with you at the time?		
in lir Forn	e 2 again as a codebto	r only if that person is a guara	antor or cosigner. Make	sure you have listed the c	ith you. List the person shown reditor on Schedule D (Official nedule E/F, or Schedule G to fill
	Column 1: Your codeb Name, Number, Street, City, St			Column 2: The creditor	or to whom you owe the debt apply:
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line ☐ Schedule G, line	
	Number Street City	State	ZIP Code	_	
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, line☐ Schedule G, line☐	
	Number Street				

Fill	in this information	to identify your ca	ase:										
Del	btor 1	Jacob Rene	Shorkey				_						
	btor 2 buse, if filing)						_						
Uni	ited States Bankru	ptcy Court for the	EASTERN DISTRICT	OF MICHI	GAN		_						
	se number			-				Chec	ck if this is	s:			
(IT K	nown)								An amend	•			
_	···	4001									ving postpetition e following date:		
	fficial Form							Ī	/IM / DD/ `	YYYY			
S	chedule I:	Your Inco	ome									12/15	
spo atta	use. If you are se ch a separate she	parated and you	are married and not filing wing the spouse is not filing wing wing the top of any additions.	ith you, do	not include	infori	matic	n abou	t your sp	ouse. If	more space is	needed,	
1.	Fill in your emp information.	Fill in your employment information.			Debtor 1				Debtor 2 or non-filing spouse				
	If you have more than one attach a separate page with information about additional employers.		Employment status	■ Employed				☐ Employed					
			. ,	☐ Not employed					☐ Not employed				
	Include part-time, seasonal, or		Occupation	SERVE	R								
	self-employed w		Employer's name	COOPE	RS HAWK								
	Occupation may or homemaker, if		Employer's address	Clinton	Township	, MI 4	803	6					
			How long employed the	here?	1 YEAR								
Par	rt 2: Give De	etails About Mon	thly Income										
Esti		ome as of the da	ate you file this form. If y	you have n	othing to repo	ort for	any I	ne, write	e \$0 in the	e space.	Include your no	n-filing	
	ou or your non-filing e space, attach a s		re than one employer, co this form.	ombine the	information f	or all e	emplo	yers for	that pers	on on the	e lines below. If	you need	
								For De	btor 1		Debtor 2 or filing spouse		
2.			ry, and commissions (becalculate what the month)			2.	\$	1	,600.00	\$	N/A		
3.	Estimate and lis	st monthly overti	me pay.			3.	+\$		0.00	+\$_	N/A		
4.	Calculate gross	Income. Add lin	e 2 + line 3.			4.	\$	1,6	00.00	\$_	N/A		

					For Debtor 1			or Debtor on-filing s		
	Copy	y line 4 here	4.	\$	1,600	0.00	\$		N/A	_
5.	List	all payroll deductions:								
•	5a.	Tax, Medicare, and Social Security deductions	5a.	9	5 270	0.00	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b.			0.00	\$_		N/A	_
	5c.	Voluntary contributions for retirement plans	5c.	9		0.00	\$-		N/A	_
	5d.	Required repayments of retirement fund loans	5d.	9		0.00	\$-		N/A	_
	5e.	Insurance	5e.	9		0.00	\$		N/A	_
	5f.	Domestic support obligations	5f.	9		0.00	\$_		N/A	_
	5g.	Union dues	5g.	9		0.00	φ-		N/A	_
	5h.	Other deductions. Specify:	5h				+ \$-		N/A	_
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.	·	·	0.00	· Ψ_ \$		N/A	_
7.		ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$			\$ \$		N/A	-
				Ψ	1,330	0.00	Ψ_			-
8.	List a	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$		0.00	\$		N/A	
	8b.	Interest and dividends	8b.	9	<u> </u>	0.00	\$-		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent	ob.	4		0.00	Ψ_		IN/A	_
	00.	regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	5 (0.00	\$		N/A	
	8d.	Unemployment compensation	8d.	9		0.00	\$		N/A	_
	8e.	Social Security	8e.	9		0.00	\$		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	6 (0.00	\$		N/A	_
	8g.	Pension or retirement income	 8g.	\$	6	0.00	\$		N/A	_
	8h.	Other monthly income. Specify:	8h	+ \$	6	0.00	+ \$ _		N/A	_
										_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_		0.00	\$_		N/A	4
				•		1 [1 [
10.			10. \$	·	1,330.00	+ \$_		N/A	= \$_	1,330.00
	Add t	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.] L	
11.	Inclu- other	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your rifiends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not a cify:	deper		-			Schedule	e <i>J.</i> +\$	0.00
12	2. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.									
12.		e that amount on the Summary of Schedules and Statistical Summary of Certai						12.	\$	1,330.00
									Combi	
13.	Do y	ou expect an increase or decrease within the year after you file this form No.	?						monthl	ly income
		Yes. Explain:								

Debtor 1 Jacob Rene Shorkey Check if this is:	EIII	in this informa	tion to identify yo	onic case.					
Debtor 2 (Spouse, if filing) United States Bankruptcy Court for the: EASTERN DISTRICT OF MICHIGAN Official Form 106J Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, etach another sheet to this form. On the top of any additional pages, write your name and case uninber (if known). Answer every question. Part :: Describe Your Household Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separate household? No over the dependents? No on the list Debtor 1 and Space in seeded, etach another sheet to this form. On the top of any additional pages, write your name and case uninber (if known). Answer every question. Part :: Describe Your Household Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separate household? No over the dependents? No on the list Debtor 1 and Space in seeded and the information for better 1 and Space in the dependent in the special page in the space in t							Cha	and if this is	
Debtor 2 (spouse, if fillings) United States Bankruptcy Court for the: _EASTERN DISTRICT OF MICHIGAN	Dep	IOI I	Jacob Rene	Snorkey					
United States Bankruptcy Court for the: EASTERN DISTRICT OF MICHIGAN Case number (It known) Commonship	Deb	tor 2						A supplement show	
Case number (If known) Comparison Compa	(Spo	ouse, if filing)						13 expenses as of	the following date:
Official Form 106J Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Your Household 1. Is this a joint case? No. Got to line 2. Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No. Do not list Debtor 1 and Yes. Fill but this information for each dependent. Debtor 2. Do not state the dependents names. Include expenses include expenses include expenses of people other than yourself and your dependents? Yes 3. Do your expenses as of your bankruptory filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptory is filled. If this is a supplemental Schedule J., check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I). 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4a. \$ 0.00 Do 0.00	Unit	ed States Bankr	uptcy Court for the:	EASTER	RN DISTRICT OF MICHIG	AN		MM / DD / YYYY	
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Answer every question.									
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Brits Describe Your Household	Of	fficial Fo	rm 106J						
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Brits Describe Your Household	So	chedule	J: Your I	Expen	ses				12/15
1. Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separate household? No. Go to line 2. No. Go to line 3. No. Go to line 4. No. Go to line 2. No. Go to line 4. No. Go to li	Be info	as complete a	and accurate as ore space is ne	possible. eded, atta	If two married people ar				
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Yes. Does Debtor 2 live in a separate household? No Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. Do you have dependents? No Debtor 1 and Debtor 2. Page	١.	_							
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Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? No No				ii a sepaia	ate flousefloid:				
Do not list Debtor 1 and			~	st file Officia	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of De	btor 2.	
Debtor 2. Do not state the dependents names. Debtor 1 or Debtor 2 age live with you? No No Yes No No Yes No Your expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule J: Your Income (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4a. \$ 0.00 No Yes No	2.	Do you have	e dependents?	■ No					
dependents names. Yes No Yes Yes No Yes Yes No Yes			ebtor 1 and	☐ Yes.				•	
dependents names. Yes No No Yes Yes No Yes Yes		Do not state	the						□ No
3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4b. \$ 0.00		dependents	names.						☐ Yes
3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4a. \$ 0.00 4b. Property, homeowner's, or renter's insurance									= : : -
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Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. \$ 250.00 If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4b. \$ 0.00	3.	expenses of	f people other th	han $_{\square}$					
the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4b. \$ 0.00	Est exp	imate your ex enses as of a	penses as of yo	our bankru	iptcy filing date unless y				
payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4b. \$ 250.00	the	value of such	n assistance and					Your exp	enses
payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4b. \$ 250.00									
 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4a. \$ 4b. \$ 0.00 0.00 	4.				-	nclude first mortgage	e 4.	\$	250.00
4b. Property, homeowner's, or renter's insurance 4b. \$ 0.00		If not includ	led in line 4:						
		4a. Real e	estate taxes				4a.	\$	0.00
4c. Home maintenance, repair, and upkeep expenses 4c. \$ 0.00		•	•					:	
4d. Homeowner's association or condominium dues 4d. \$ 0.00 5. Additional mortgage payments for your residence, such as home equity loans 5. \$ 0.00	5.					me equity loans		·	

Schedule J: Your Expenses 19-47346-mbm Doc 1 Filed 05/14/19 Entered 05/14/19 15:59:15 Page 36 of 49 Official Form 106J

Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

□ Yes.

Explain here:

Fill in this infor				
Debtor 1	Jacob Rene Shor	key		
Dobtor 2	First Name	Middle Name	Last Name	
Debtor 2 Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	EASTERN DISTRICT	OF MICHIGAN	
Case number (if known)				☐ Check if this is an amended filing
Official For	m 106Dec			
Declara ⁴	tion About a	an Individua	al Debtor's Sched	u les 12/15
btaining mone		n connection with a ba		a false statement, concealing property, or p to \$250,000, or imprisonment for up to 20
btaining mone ears, or both. 1 Sig Did you pa	ey or property by fraud in 18 U.S.C. §§ 152, 1341, 1 gn Below	n connection with a ba		p to \$250,000, or imprisonment for up to 20 cy forms? Attach Bankruptcy Petition Preparer's Notice,
Did you pa Did Yes. Under penathat they are	ey or property by fraud in 18 U.S.C. §§ 152, 1341, 1 gn Below ay or agree to pay some Name of person alty of perjury, I declare re true and correct.	n connection with a ba	nkruptcy case can result in fines u	cy forms? Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
btaining mone ears, or both. 1 Sig Did you pa No Yes. Under penathat they ar	ey or property by fraud in 18 U.S.C. §§ 152, 1341, 1 gn Below ay or agree to pay some Name of person alty of perjury, I declare re true and correct. cob Rene Shorkey	n connection with a ba	nkruptcy case can result in fines under the second services or new to help you fill out bankrupton immary and schedules filed with the second services of the second secon	p to \$250,000, or imprisonment for up to 20 cy forms? Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) is declaration and
Did you pa Did you pa No Yes. Under penathat they ar X /s/ Jacob	ey or property by fraud in 18 U.S.C. §§ 152, 1341, 1 gn Below ay or agree to pay some Name of person alty of perjury, I declare re true and correct.	n connection with a ba	nkruptcy case can result in fines u	p to \$250,000, or imprisonment for up to 20 cy forms? Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) is declaration and
Did you pa Did you pa No Yes. Under penathat they an X /s/ Jacob Signatu	ey or property by fraud in 18 U.S.C. §§ 152, 1341, 1 gn Below ay or agree to pay some Name of person alty of perjury, I declare re true and correct. cob Rene Shorkey Rene Shorkey	n connection with a ba	nkruptcy case can result in fines under the second services or new to help you fill out bankrupton immary and schedules filed with the second services of the second secon	p to \$250,000, or imprisonment for up to 20 cy forms? Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) is declaration and

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

Fill	in this inforn	nation to identify you	r case:			
Der	otor 1	Jacob Rene Sho	Middle Name	Last Name		
	otor 2	First Name	Middle Name	Loot Name		
	use if, filing)			Last Name		
Uni	ted States Ba	nkruptcy Court for the:	EASTERN DISTRICT OF	MICHIGAN		
	se number				_	Check if this is an mended filing
Sta Be a info	ns complete a	of Financial	attach a separate sheet to	re filing together, both are	eankruptcy equally responsible for sup y additional pages, write you	
Par	t 1: Give D	Petails About Your Ma	rital Status and Where You	Lived Before		
1.	What is you	r current marital statu	is?			
	☐ Married					
	■ Not mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	t all of the places you I	ived in the last 3 years. Do no	ot include where you live now	ı.	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. state					ity property state or territory	
	■ No □ Yes. Ma	ske sure you fill out <i>Scl</i>	nedule H: Your Codebtors (Of	ficial Form 106H).		
Par	t 2 Explai	n the Sources of You	r Income			
4.	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part		ndar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$5,734.00	☐ Wages, commissions, bonuses, tips	
			□ Operating a business		☐ Operating a business	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

Creditor's Name and Address

☐ Yes

Dates of payment

Total amount paid

List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an

> Amount you still owe

Was this payment for ...

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 2

attorney for this bankruptcy case.

De	BOILD Jacob Rene Snorkey		Cas	e number (if known)		
7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. A alimony.	artners; relatives of any gen n control, or owner of 20% of	neral partners; partne or more of their voting	erships of which yo g securities; and a	u are a general ny managing ag	partner; corporations ent, including one for
	■ No□ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	his payment
3.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos	d for bankruptcy, did you make any payments or transfer any property o		ny property on a	ccount of a del	ot that benefited an
	Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the Include credit	
Dο	ort 4: Identify Logal Actions Department	no and Faranlacuras	•			
Гa	Identify Legal Actions, Repossessio	ns, and Foreciosures				
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.					
	□ No					
	Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the case	
	DISCOVER BANK -VS- JACOB R. SHORKEY 19-1176-GC	SUIT FOR DEBT	42-2ND DISTRI	CT COURT	■ Pending □ On appea □ Conclude	
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo		erty repossessed, f	oreclosed, garnis	shed, attached,	seized, or levied?
	No. Go to line 11.Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		Date		Value of the
		Explain what happene	d			property
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment bed No Yes. Fill in the details.		cluding a bank or fir	nancial institution	n, set off any an	nounts from your
	Creditor Name and Address	Describe the action the	e creditor took	Date taker	action was	Amount
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a		erty in the possess			it of creditors, a
	☐ Yes					

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 3

Deb	otor 1 Jacob Rene Shorkey	Case number	(if known)	
Par	rt 5: List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankrupt ■ No □ Yes. Fill in the details for each gift.	cy, did you give any gifts with a total value of more t	han \$600 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	■ No	cy, did you give any gifts or contributions with a tot	al value of more than	\$600 to any charity?
	☐ Yes. Fill in the details for each gift or cont Gifts or contributions to charities that tota more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Dates you contributed	Value
Par	tt 6: List Certain Losses			
15.	Within 1 year before you filed for bankrupto or gambling?	y or since you filed for bankruptcy, did you lose any	thing because of the	it, fire, other disaster,
	■ No □ Yes. Fill in the details.			
	how the loss occurred	escribe any insurance coverage for the loss clude the amount that insurance has paid. List pending surance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers			
16.	consulted about seeking bankruptcy or pre	ey, did you or anyone else acting on your behalf pay paring a bankruptcy petition? parers, or credit counseling agencies for services require		rty to anyone you
	□ No			
	Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Person Who Made the Payment, if Not You Robert W. Lee 25550 North River Road Harrison Township, MI 48045 Robert.W.Lee@comcast.net	Attorney Fees	APRIL, 2019	\$100.00
17.	Within 1 year before you filed for bankrupto	y, did you or anyone else acting on your behalf pay	or transfer any prope	rty to anyone who
	promised to help you deal with your creditor Do not include any payment or transfer that yo			
	No☐ Yes. Fill in the details.			
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.						
	Person Who Received Transfer Address	Description and v		payme	pe any property or nts received or debts exchange	Date transfer was made	
19.	Person's relationship to you Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details.						
	Name of trust	Description and v	alue of the prop	erty transf	erred	Date Transfer was made	
Par	tt 8: List of Certain Financial Accounts, Inst	ruments, Safe Deposit	Boxes, and Sto	rage Units			
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associ ■ No □ Yes. Fill in the details.	other financial accou	nts; certificates o	of deposit;		,	
		Last 4 digits of account number	Type of account or instrument		Date account was closed, sold, moved, or transferred	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 ye cash, or other valuables?	ear before you filed for	bankruptcy, any	y safe depo	osit box or other deposi	tory for securities,	
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)		Describe t	he contents	Do you still have it?	
22.	Have you stored property in a storage unit or	place other than your	home within 1 y	ear before	you filed for bankruptc	y?	
	■ No □ Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe t	he contents	Do you still have it?	
Par	t 9: Identify Property You Hold or Control for	or Someone Else					
23.	Do you hold or control any property that some for someone. No Yes. Fill in the details.	neone else owns? Inclu	ude any property	/ you borro	owed from, are storing fo	or, or hold in trust	
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)	perty? I	Describe t	he property	Value	
Par	t 10: Give Details About Environmental Info	rmation					

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy page 5

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Best Case Bankruptcy

	toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.							
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.							
Rep	ort a	II notices, releases, and proceedings th	hat y	ou know about, regardless of when	the	ey occurred.		
24.	Has	any governmental unit notified you that	at yo	u may be liable or potentially liable	unc	ler or in violation of an environm	ental law?	
		No Yes. Fill in the details.						
		me of site dress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State and ZIP Code)	ı	Environmental law, if you know it	Date of notice	
25.	Hav	e you notified any governmental unit of	of any	release of hazardous material?				
		No Yes. Fill in the details.						
		me of site dress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State and ZIP Code)	i	Environmental law, if you know it	Date of notice	
26.	Hav	e you been a party in any judicial or ad	dmini	strative proceeding under any envi	ronr	mental law? Include settlements	and orders.	
		No Yes. Fill in the details.						
		se Title se Number		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case	
Par	t 11:	Give Details About Your Business or	r Con	nections to Any Business				
27.	Witl	nin 4 years before you filed for bankrup	ptcy,	did you own a business or have an	y of	the following connections to any	y business?	
		lacksquare A sole proprietor or self-employed	l in a	trade, profession, or other activity,	eith	er full-time or part-time		
		☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)						
	☐ A partner in a partnership							
	☐ An officer, director, or managing executive of a corporation							
	☐ An owner of at least 5% of the voting or equity securities of a corporation							
	No. None of the above applies. Go to Part 12.							
		Yes. Check all that apply above and fil	es. Check all that apply above and fill in the details below for each business.					
	Business Name Address			escribe the nature of the business		Employer Identification number Do not include Social Security number or ITIN.		
	(Nul	mber, Street, City, State and ZIP Code)	Na	ame of accountant or bookkeeper		Dates business existed		
28.		nin 2 years before you filed for bankrup itutions, creditors, or other parties.	ptcy,	did you give a financial statement t	o ar	nyone about your business? Incl	ude all financial	
		No Yos Fill in the details below						
		Yes. Fill in the details below.	Da	ata leguad				
	Name Address (Number, Street, City, State and ZIP Code)							

Part 12: Sign Below

I have read the answers on this *Statement* of *Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

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Debtor 1 Jacob Rene Shorkey	Case number (if known)
	making a false statement, concealing property, or obtaining money or property by fraud in connection nes up to \$250,000, or imprisonment for up to 20 years, or both.
/s/ Jacob Rene Shorkey	
Jacob Rene Shorkey	Signature of Debtor 2
Signature of Debtor 1	
Date May 13, 2019	Date
Did you attach additional pages to You	ur Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
No	
□Yes	
Did you pay or agree to pay someone	who is not an attorney to help you fill out bankruptcy forms?
■ No	

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

United States Bankruptcy Court Eastern District of Michigan

In re	Jacob Rene Shorkey		Case No.	
		Debtor(s)	Chapter	7
	VERI	FICATION OF CREDITOR	MATRIX	
The ab	ove-named Debtor hereby verifies the	at the attached list of creditors is true and o	correct to the best	of his/her knowledge.
Date:	May 13, 2019	/s/ Jacob Rene Shorkey		
		Jacob Rene Shorkey		

Signature of Debtor

American Express PO Box 981537 El Paso, TX 79998

Barclays Bank Delaware PO Box 8803 Wilmington, DE 19899

Capital One Bank USA 10700 Capital One Way Glen Allen, VA 23060

CB/Carson's PO Box 182789 Columbus, OH 43218

Chase P.O. Box 15298 Wilmington, DE 19850

Clarkston Lakes Family Medicine PO Box 775415 Chicago, IL 60677

Discount Tire PO Box 965036 Orlando, FL 32896

Discover PO Box 15316 Wilming, DE 19850

Henry Ford Health System PO Box 553920 Detroit, MI 48255

Kohl's PO Box 3115 Milwaukee, WI 53201

LCA Collections c/o Laboratory Corp of America PO Box 2240 Burlington, NC 27216 LJ Ross and Assoc 4 Universal Way Jackson, MI 49202

Lord & Taylor/Capital One PO Box 30253 Salt Lake City, UT 84130-0285

Macy's - Customer Service PO Box 8218 Mason Oh, io 45040

MI Schools & Government Credit Union 40400 Garfield Rd Clinton Twp., MI 48038

Midland Credit Management 2365 Northside Drive Ste 300 San Diego, CA 92108

Nationwide Credit PO Box 14581 Des Moines, IA 50306

Nordstrom/TD Bank USA 13531 E Caley Ave Englewood, CO 80111

Paypal/SYNCB PO Box 5138 Timonium, MD 21094

Portfolio Recovery 120 Corporate Blvd Norfolk, VA 23502

Roseville Urgent Care 20769 E 13 Mile Rd Roseville, MI 48066

SYNCB/ABC WAREHOUSE Attn: Bankruptcy Dept. PO Box 965036 Orlando, FL 32896 SYNCB/Car Care Disc Tire PO Box 965001 Orlando, FL 32896

SYNCB/Care Credit Attn: Bankruptcy Dept. PO Box 965036 Orlando, FL 32896